BEST AVAILABLE COPY PTO/SB/01 (08-03) Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number 4 THAR DECLARATION FOR UTILITY OR P69691 First Named Inventor KING ET AL **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number 10/807715 Filing Date Declaration Declaration 03/24/2004 Submitted Submitted after Initial Art Unit With Initial Filing (surcharge Filing (37 CFR 1.16 (e)) **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: FOLDING WARDROBE KIT FOR CLAMSHELL-TYPE LUGGAGE CASE (Title of the Invention) the specification of which is attached hereto OR kx 03/24/2004 was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). 10/807,715 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application

and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Foreign Filing Date **Priority** Certified Copy Attached? Country Number(s) (MM/DD/YYYY) **Not Claimed** Yes

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	x Custome	r Number:	0191	.4		OR		Corresp	ondence ad	dress below
Name										
Address										
City	-			State					ZIP	
Country		Telephone				Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					willful false					
NAME OF SOLE OR FIRST IN	VENTOR:		A pd	etition h	as bee	en filed	for this	s unsian	ned inventor	
Given Name (first and middle [if any])	William	L.			Fa	amily N Surna	Name		ing	·
Inventor's Signature	. L. K.									1/14
Residence: City Denver	State C	0		Count	y US	3		Citizer	nship US	3
Mailing Address 1371 South Ed:	ison Way									
City Denver	State C	0			ZIP	8022	22		Country	US
NAME OF SECOND INVENTO	R:				A pe	tition h	nas bee	en filed f	for this unsig	ned inventor
Given Name (first and middle [if any])	Daniel G	·^				mily N Surna		E1	lles	
Inventor's Signature	In Ele	h							Date 4/21	04
Residence: City Conifer	State Colo	rado		Count	•	JS		Citizei	nship US	
Mailing Address								-		
9853 S. Corsair Drive										
City Conifer	State Colo	rado			ZIP 80)433		Count	ury US	
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.										

PTO/SB/02A (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

ADDITIONAL INVENTOR(S)

DECLARATION			Supplemental Sheet 1 Page of				
Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)		Family Nam	e or S	Surname		 ,	
Glenn /		Sch	mie	erer		f	
Inventor's Signature			·		Date 2	104	
Residence: City Golden	State	со	Cour	ntry US	Citizenship US		
Mailing Address 601 Camp Eden Road							
Mailing Address							
City Golden	State	, co		_{Zip} 80403	Country	US	
Name of Additional Joint Inventor, if any:		☐ A peti	ition h	nas been filed for this	unsigned in	ventor	
Given Name (first and middle (if any)		Family Name or Surname					
Jonathan Ted		Chopper					
Inventor's Signature Told Champer	Date 4/21/04						
Residence: City Arvada	State	CO		Country US		Citizenship	US
Mailing Address 8016 Parfet Way							
Mailing Address							
City Arvada	State	. CO		Zip 80005	Country	US	
Name of Additional Joint Inventor, if any:		☐ A peti	ition h	nas been filed for this	unsigned inv	ventor	
Given Name (first and middle (if any)		Family Name or Surname					
Inventor's Signature		Date					
Residence: City	State)		Country		Citizenship	
Mailing Address							
Mailing Address				·			
City	State)		Zip	Country		

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

JUN 2 8 2004 PUNDER

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ca to respond to a concedent of fino	mation unless it displays a valid ONE control number.
Application Number	10/807715
Filing Date	03/24/2004
First Named Inventor	King
Title	FOLDING WARDROBE KIT FOR
Art Unit	CLAMSHELL-TYPE LUGGAGE CAS
Examiner Name	
Attorney Docket Number	P69691

I hereby appoint:				7	
XX Practitioners associated with the Customer Number:	01914				
OR	L				
Practitioner(s) named below:					
Name			Registration No	umber	
			,		
		<u> </u>			
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified abo	ve, and to trans	sact all business in	the United States Patent and	
Please recognize or change the correspondence address for	the above-ide	ntified application	on to:		
The address associated with the above-mentioned (Customer Num	nber:			
OR					
The address associated with Customer Number:	The address associated with Customer Number:				
OR					
Firm or Individual Name		-	•		
Address					
Address		I Chata I	·	1 7: ₂ 1	
City Country		State		Zip	
Telephone		Fax			
I am the: XX Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Name William L. King					
Signature William & King			Tolophore		
Date 4/21/0 %			Telephone	7396	
NOTE: Signatures of all the inventors or assignees of record of the enforms if more than one signature is required, see below*.	tire interest or th	eir representative	e(s) are required. Sub	mit multiple	
*Total of 4 forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

er the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

red to respond to a collection of info	mation unless it displays a valid OMB control number.
Application Number	10/807715
Filing Date	03/24/2004
First Named Inventor	King
Title	FOLDING WARDROBE KIT FOR
Art Unit	CLAMSHELL-TYPE LUGGAGE CAS
Examiner Name	
Attorney Docket Number	P69691

I hereby appoint:				· · · · · · · · · · · · · · · · · · ·		
XX Practitioners associated with the Customer Number:	0191	4				
OR		· ·				
Practitioner(s) named below:						
Name			Registration	Mumbor		
Name			Registration	- Number		
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified al	bove, and to trans	sact all business	s in the Un	ited States Patent and	
Please recognize or change the correspondence address for	the above-io	dentified application	ion to:			
The address associated with the above-mentioned C	Customer No	umber:				
OR						
The address associated with Customer Number:						
OR						
Firm or Individual Name						
Address						
Address				1 1		
City		State		Zip		
Telephone		Fax			_	
I am the:			*			
XX Applicant/Inventor.	•					
Assignee of record of the entire interest. See 37 CFF Statement under 37 CFR 3.73(b) is enclosed. (Form		5)				
SIGNATURE of	SIGNATURE of Applicant or Assignee of Record					
Name Daniel G. Elles			-			
Signature S Laboratoria					-	
Date 4/21/04			Telephone	303-3	73- 2000	
NOTE: Signatures of all the inventors or assignees of record of the ent forms if more than one signature is required, see below*.	ire interest or	their representative	e(s) are required. S	Submit multip	ple	
*Total of4 forms are submitted.						

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it displays a valid OMB acceptable.

der the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

so to respond to a conection of information unless it displays a valid Olvid control number.					
Application Number	10/807715				
Filing Date	03/24/2004				
First Named Inventor	King				
Title	FOLDING WARDROBE KIT FOR				
Art Unit	CLAMSHELL-TYPE LUGGAGE CASI				
Examiner Name					
Attorney Docket Number	P69691				

I hereby appoint:						
XX Practitioners associated v	with the Customer Number: 019	14				
OR	L					
Practitioner(s) named below:						
Name Registration Number						
			·			
	····					
as my/our attorney(s) or agent(s Trademark Office connected the	i) to prosecute the application identified arewith.	above, and to trans	sact all business in the United States Pater	nt and		
Please recognize or change the	correspondence address for the above-	identified application	on to:			
	ed with the above-mentioned Customer N					
OR	<u></u>					
The address associated with Customer Number:						
OR						
Firm or Individual Name						
Address	Address					
Address						
City		State	Zip			
Country Telephone		Fax				
I am the:		T ax				
XX Applicant/Inventor.		•				
Assignee of record of the Statement under 37 CF	he entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/SB/S	96)				
SIGNATURE of Applicant or Assignee of Record						
Name Ghein Sc	hmierer					
Signature	2					
Date 4.21.04			Telephone			
NOTE: Signatures of all the inventors forms if more than one signature is re	s or assignees of record of the entire interest of equired, see below*.	or their representative	e(s) are required. Submit multiple			
*Total of 4 f	*Total of4 forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

der the Paperwork Reduction Act of 1995, no persons are require

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

ed to respond to a collection of intor	mation unless it displays a valid OMB control number.
Application Number	10/807715
Filing Date	03/24/2004
First Named Inventor	King
Title	FOLDING WARDROBE KIT FOR
Art Unit	CLAMSHELL-TYPE LUGGAGE CASI
Examiner Name	
Attorney Docket Number	P69691

I hereby appoint:					
XX Practitioners associated wi	ith the Customer Number: 019	14			
OR .					
Practitioner(s) named below:					
Name Registration Number					
		·			
			· · · · · · · · · · · · · · · · · · ·		
as my/our attorney(s) or agent(s) Trademark Office connected there	to prosecute the application identified ewith.	above, and to tran	nsact all business in the United States Patent and		
Please recognize or change the c	correspondence address for the above	identified applicat	tion to:		
The address associated	with the above-mentioned Customer I	Number:			
OR					
The address associated with Customer Number:					
OR					
Firm or Individual Name					
Address					
Address					
City		State	Zip		
Telephone		Fax			
I <u>am</u> the:					
XX Applicant/Inventor.					
	e entire interest. See 37 CFR 3.71. R 3.73(b) is enclosed. (Form PTO/SB/S	96)			
SIGNATURE of Applicant or Assignee of Record					
Name Jonathan Te	ed Chopper				
Signature Constant	ed (Nomeer				
Date 4/21/04			Telephone 303-373-2000		
NOTE: Signatures of all the inventors of forms if more than one signature is required.	or assignees of record of the entire interest quired, see below*.	or their representative	ve(s) are required. Submit multiple		
*Total of <u>4</u> for	rms are submitted.				

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.